JAN 27 1989

CERTIFIED MAIL
RETURN RECEIPT REQUESTED

Mr. John DeGryse Plant Manager Eagle Signal Controls 736 Federal Street Davenport, Iowa 52803

RE: Eagle Signal Controls

Davenport, Iowa

EPA ID No. IAD051001337

Dear Mr. DeGryse:

On November 10, 1988, this Agency sent you a Letter of Warning as a result of the July 5, 1988 inspection of your facility. On December 7, 1988 you responded to our letter.

My staff has reviewed your response and determined that it adequately addresses our concerns. Therefore, no further submittals are necessary at this time. However, during future inspections of your facility, our inspector will be checking to make sure that you are properly identifying your waste paint stream as a F003 waste and sending the appropriate land disposal notification. The waste paint steam has been identified by our inspector as a F003 waste due to the fact that you are mixing your paint skimmings with waste xylene, which is a F003 waste.

We would like to remind you that your facility is responsible for maintaining compliance with all applicable hazardous waste regulations. If you should have any questions concerning this letter, please call Ms. Lynn Slugantz at (913) 236-2887.

Sincerely yours,

David A. Wagoner
Director,
Waste Management Division

RCRA RECORDS CENTER

cc: Pete Hamlin, IDNR

WSTM/RCRA/IOWA/SLUGANTZ/LS/1-2-89; disk6; eagle.loc; 1-23-89; 1-24-89

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## UNITED STATES ENVIRONMENTAL PROTECTION AGENCY

### REGION VII 726 MINNESOTA AVENUE KANSAS CITY, KANSAS 66101

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Director,

Waste Management Division

cc: Pete Hamlin, IDNR



# P 716 387 215 RECEIPT FOR CERTIFIED MAIL NO INSURANCE COVERAGE PROVIDED NOT FOR INTERNATIONAL MAIL



(See neverse)	
Sent to John plex	Greece
Street and No. Lelleral.	SA
PO., State and ZIP Code	52803
Postage	S
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opecial Delivery Fee	
Restricted Delivery Fee	
Return Receipt showing to whom and Date Delivered	4.0
Return Receipt showing to whom, Date, and Address of Delivery	
TOTAL Postage and Fees	S

PS Form 3800, June 1985

# STICK POSTAGE STAMPS TO ARTICLE TO COVER FIRST CLASS POSTAGE, CERTIFIED MAIL FEE, AND CHARGES FOR ANY SELECTED OPTIONAL SERVICES. (see front)

- If you want this receipt postmarked, stick the gummed stub to the right of the return address leaving the receipt attached and present the article at a post office service window or hand it to your rural carrier. (no extra charge)
- If you do not want this receipt postmarked, stick the gummed stub to the right of the return address of the article, date, detach and retain the receipt, and mail the article.
- 3. If you want a return receipt, write the certified mail number and your name and address on a return receipt card, Form 3811, and attach it to the front of the article by means of the gummed ends if space permits. Otherwise, affix to back of article. Endorse front of article **RETURN RECEIPT REQUESTED** adjacent to the number.
- If you want delivery restricted to the addressee, or to an authorized agent of the addressee, endorse RESTRICTED DELIVERY on the front of the article.
- 5. Enter fees for the services requested in the appropriate spaces on the front of this receipt. If return receipt is requested, check the applicable blocks in item 1 of Form 3811.
- 6. Save this receipt and present it if you make inquiry.

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.  Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.  1. Show to whom delivered, date, and addressee's address.  2. Restricted Delivery †(Extra charge)↑		
3. Article Addressed to:  Mr. John De Grupe Mp.  Eagle Signal Controls  136 Federal St.	4. Article Number P116 387215  Type of Service: Registered Insured Certified COD Express Mail	
Davenpert, Ja 52803	Always obtain signature of addressee or agent and DATE DELIVERED.	
5. Signature — Addressee X	8. Addressee's Address (ONLY if requested and fee paid)	
8 Signature - Agent X M. Hendricks		
7. Date of Delivery		
PS Form/3811/Mar. 1987 * U.S.G.P.O. 1987-178-268	DOMESTIC RETURN RECEIPT	

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### SENDER INSTRUCTIONS

Print your name, address, and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.





USE, \$300

RETURN

TO



Print Sender's name, address, and ZIP Code in the space below.

U.S. EPA, RCRA Branch

726 Minnesota Avenue

Kansas City, Kansas 66101

LS